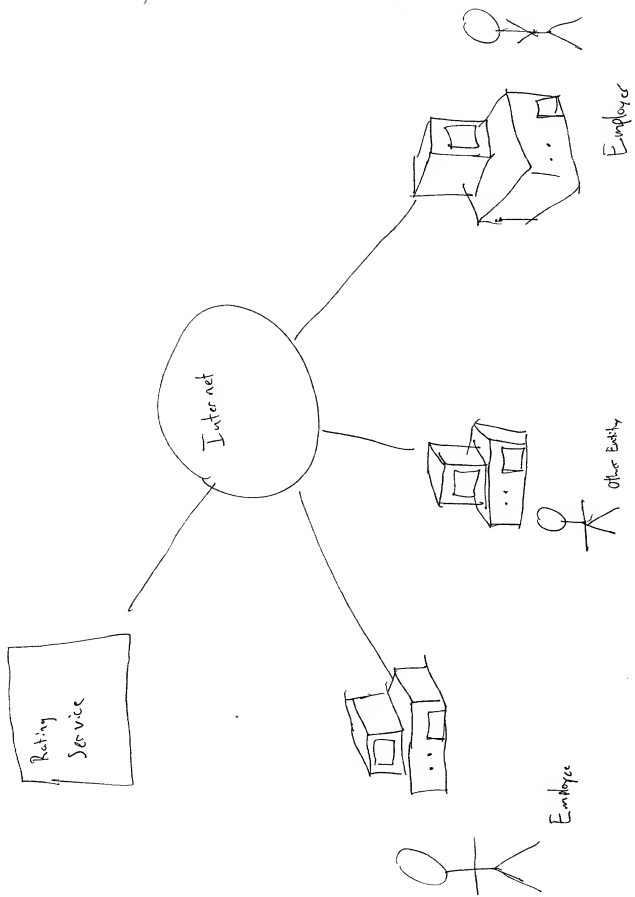


Fig. 1



Employee Feedback Categories/Sub-Categories

Level 1	Level 2	Level 3
Environment	<ul style="list-style-type: none"> Facilities Working Hours Work Area Facilities/Amenities Culture Organizational Structure Other 	<ul style="list-style-type: none"> Accommodations Space/Recreational Equipment Decor Teleconferencing Coffee Refresh Center ATM Lunch Room Printing Shower Other Entrepreneurial Administrative Manufacturing Professional Team Oriented Other Culture Recognition Health & Wellness Other
Corporate Communications	<ul style="list-style-type: none"> Management Quality Flow Through Organization Conflict Management Other 	
Products & Service Offerings	<ul style="list-style-type: none"> Improvements Process/Procedural Other 	
Personnel/HR	<ul style="list-style-type: none"> Education/Quality of Life Appreciation Respect Interpersonal Interactions w/ Management/Peers/Direct or Indirect Reporting (On/Offsite) Other 	
Benefits	<ul style="list-style-type: none"> Medical Benefits Dental Benefits Disability Benefits Life Insurance Other 	<ul style="list-style-type: none"> Medical Vision Health/Personal Teeth Retirement Medical/Personal Life Health/Personal Insurance Disability Life Insurance Other Medical Disability Life Insurance Other Medical Disability Life Insurance Other Medical Disability Life Insurance Other
Compensation	<ul style="list-style-type: none"> Salary Benefits Other 	<ul style="list-style-type: none"> Salary Benefits Other
Career Development	<ul style="list-style-type: none"> Training Administration Other 	<ul style="list-style-type: none"> Training Education Professional Development Other Administration Other

Fig. 2

Main Menu

Employee Feedback

Letter

Survey

Rating Report

Consumer Feedback

Letter

Rating Report

Consumer/Employee Rating Report

Employee Feedback Survey Results

Fig. 3

Composing an Employee Letter

*	Letter Feedback Type	V
*	Industry	V
*	Company Name	V
*	Company Web Address	V
	Employee Name	V
	Employee E-Mail	V
*	City/State	V

Registered Users: Log In Here:

E-Mail Address:	
Password:	

*(Note: AOL Users: Be sure to include @aol.com)

UnRegistered Users: Register Here!

E-Mail Address:	
-----------------	--

*(Note: AOL Users: Be sure to include @aol.com)

Setup Password:	
Password:	
Confirm Password:	

Back

Continue

Fig. 4A

Composing an Employee Letter

Letter Feedback Type: Carried Over Automatically

Industry: Carried Over Automatically

Company Contact Name: Carried Over Automatically

Company Address: Carried Over Automatically

* Feedback Category ☒

* Sub-Category 1 ☒

* Sub-Category 2 ☒

Take your temperature with the following questions!

Overall Company Satisfaction:

☐ Very Satisfied ☐ Somewhat Satisfied ☐ Neutral ☐ Somewhat Dissatisfied ☐ Very Dissatisfied

Would this Experience Cause you to Look for Another Job?

☐ Definitely ☐ Probably ☐ Possibly ☐ Probably Not ☐ Definitely Not

Intent to Tell Others:

☐ Definitely ☐ Probably ☐ Possibly ☐ Probably Not ☐ Definitely Not

Back

Continue

Fig. 4B

Composing Your ACKNOWLEDGEMENT Letter

[DATE]

[Company Contact Name]

[Company Name]

[Company Address]

[City, State, Zip]

[Salutation]

I am writing to acknowledge the area of **FIELD/ACK CATEGORY 1** specifically related to **(SUB-CATEGORY 1) (SUB-CATEGORY 2)**. Allow me to recount my positive experience which has led me to send this letter of acknowledgement.

(Type Here)

*Include Name(s), Department, Product, Service, Process etc. Include Date(s) of occurrence
Tell them specifics about your positive experience*

(250 Maximum Character Length)

As a result of this experience, I would like to suggest/recommend:

(Type Here)

*Here's your chance to nominate someone for an award, simply a statement of recognition
or just to keepin' on with a process, procedure etc.*

(250 Maximum Character Length)

If based on this experience, I rate my overall company satisfaction as (Carry Over). In addition, this experience will (Carry Over) cause me to look for a new job. I (Carry Over) intend to tell others about my experience.

Thank you for this opportunity to share my experience.

Complimentary Close

☐ I want the following information to appear in my letter:

First Name:

Last Name:

Address:

Address:

City:

State:

Zip:

Fig 5

Composing Your Letter of CONCERN

[DATE]

[Company Contact Name]

[Company Name]

[Company Address]

[City, State, Zip]

[Salutation]

I am writing to express a concern I have in the area of [FEEDBACK CATEGORY] within your company, specifically related to [SUB-CATEGORY 1] (SUB-CATEGORY 2). Allow me to recount the events surrounding my concern which has prompted me to write this letter:

(Type Here)

Tell them your concern. Include specifics. BE CONSTRUCTIVE!

(250 Maximum Character Length)

As a result of this experience, I would like to suggest improvement:

(Type Here)

Provide them a positive alternative solution towards your concern

(250 Maximum Character Length)

Based on this experience, I rate my overall company satisfaction as [Carry Over]. In addition, this experience will [Carry Over] cause me to look for a new job. I [Carry Over] intend to tell others about my experience.

Thank you for this opportunity to share my experience.

Complimentary Close

☒

☐ I want the following information to appear in my letter:

First Name:

Last Name:

Address 1:

Address 2:

City:

State:

Zip:

Fig. 6

Composing Your RECOMMENDATION Letter

[DATE]

[Company Contact Name]

[Company Name]

[Company Address]

[City, State, Zip]

[Salutation]

I am writing to offer a recommendation in the area of (FEEDBACK CATEGORY), specifically related to (SUB-CATEGORY 1) (SUB-CATEGORY 2). Allow me to re-share my experience which has led me to send this letter of recommendation:

(Type Here)

Include Name(s), Title(s), Department, Product, Service, Process etc.

Include Dates if applicable. Be Specific!

(250 Maximum Character Length)

As a result of this experience, I would like to suggest/recommend:

(Type Here)

Here's your chance to make a difference within your company - Take Advantage of It!

Be specific, and offer more than one recommendation if you can.

(250 Maximum Character Length)

Based on this experience, I rate my overall company satisfaction as (Carry Over). In addition, this experience will (Carry Over) cause me to look for a new job. I (Carry Over) intend to tell others about my experience.

Thank you for this opportunity to share my experience, and to offer my recommendation.

Complimentary Close

☐ I want the following information to appear in my letter:

First Name:

Last Name:

Address 1:

Address 2:

City:

State:

Zip:

Composing Your INQUIRY Letter

[DATE]

[Company Contact Name]

[Company Name]

[Company Address]

[City, State, Zip]

[Salutation]

I am writing about an inquiry that I have in the area of (FEEDBACK CATEGORY) within your company, specifically related to (SUB-CATEGORY 1) (SUB-CATEGORY 2). As a result of my interest, allow me to provide some detail surrounding my inquiry.

(Type Here)

Do you have an experience or situation that has led you to your inquiry/question? If so, background information is usually helpful. Don't leave 'em guessing.

Where did this question come from?

(250 Maximum Character Length)

(AND/OR)

(Type Here)

Type your inquiry/question here

(250 Maximum Character Length)

Based on this experience, I rate my overall company satisfaction as (Carry Over). In addition, this experience will (Carry Over) cause me to look for a new job. (Carry Over) intend to tell others about this experience.

Thank you for this opportunity to inquire within your company.

Complimentary Close

[V]

* The following information must be included in letter in order to receive an answer to your inquiry.

First Name:

Last Name:

E-Mail Address:

Address 1:

Address 2:

City:

State:

Zip:

Fig. 8

102011 29231004

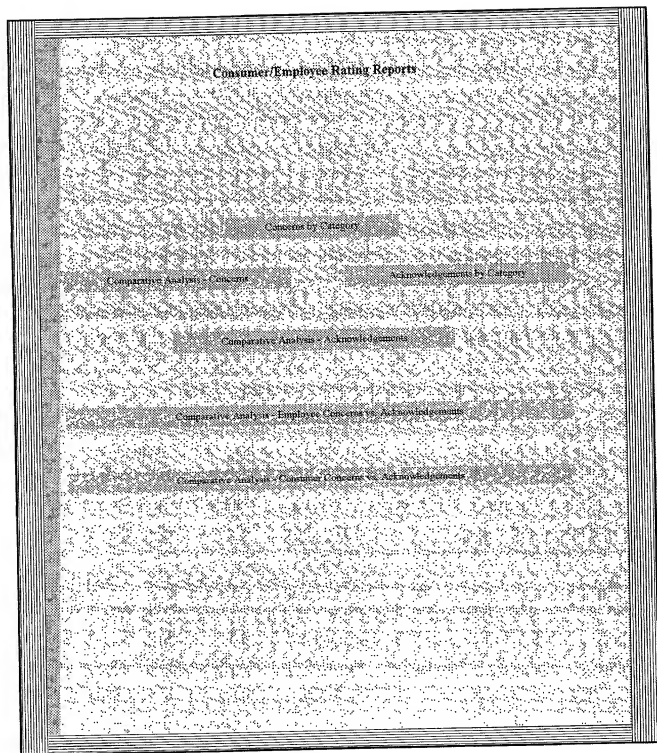


Fig. 9

Employee Rating Report
as of 11/3/00

of Acknowledgements)
(# of Concerns)

General Information										Performance Metrics										Financial Data										Operational Details									
Project Overview					Key Indicators					Revenue					Profitability					Costs					Timeline					Logistics					Compliance				
Project ID	Name	Manager	Status	Priority	Start Date	End Date	Progress %	Completion %	Quality Score	Revenue (M\$)	Profit (M\$)	Margin %	Operating Exp. (M\$)	Capital Exp. (M\$)	ROI %	Payback Period (Yrs)	Revenue (M\$)	Profit (M\$)	Margin %	Operating Exp. (M\$)	Capital Exp. (M\$)	ROI %	Payback Period (Yrs)	Revenue (M\$)	Profit (M\$)	Margin %	Operating Exp. (M\$)	Capital Exp. (M\$)	ROI %	Payback Period (Yrs)	Revenue (M\$)	Profit (M\$)	Margin %	Operating Exp. (M\$)	Capital Exp. (M\$)	ROI %	Payback Period (Yrs)		
001	INITIAL SERVICES	IT CONSULTING	NEW PROJECT	High	2023-01-01	2023-03-31	100%	100%	95	10.0	2.0	20%	8.0	0.5	25%	1.5	10.0	10.0	2.0	20%	8.0	0.5	25%	1.5	10.0	10.0	2.0	8.0	0.5	25%	1.5	10.0	10.0	2.0	8.0	0.5	25%	1.5	
										11.0	2.2	20%	9.0	0.6	27%	1.6	11.0	11.0	2.2	20%	9.0	0.6	27%	1.6	11.0	11.0	2.2	9.0	0.6	27%	1.6								
										12.0	2.4	20%	10.0	0.7	30%	1.7	12.0	12.0	2.4	20%	10.0	0.7	30%	1.7															
002	INITIAL SERVICES	IT CONSULTING	New Project	Medium	2023-04-01	2023-06-30	75%	60%	90	15.0	3.0	20%	12.0	1.0	17%	2.0	15.0	15.0	3.0	20%	12.0	1.0	17%	2.0	15.0	15.0	3.0	12.0	1.0	17%	2.0	15.0	15.0	3.0	12.0	1.0	17%	2.0	
										16.0	3.2	20%	13.0	1.1	19%	2.1	16.0	16.0	3.2	20%	13.0	1.1	19%	2.1	16.0	16.0	3.2	13.0	1.1	19%	2.1								
										17.0	3.4	20%	14.0	1.2	21%	2.2	17.0	17.0	3.4	20%	14.0	1.2	21%	2.2															
003	INITIAL SERVICES	IT CONSULTING	New Project	Low	2023-07-01	2023-09-30	20%	10%	85	5.0	1.0	20%	4.0	0.2	5%	0.5	5.0	5.0	1.0	20%	4.0	0.2	5%	0.5	5.0	5.0	1.0	4.0	0.2	5%	0.5	5.0	5.0	1.0	4.0	0.2	5%	0.5	
										5.5	1.1	20%	4.5	0.3	6%	0.6	5.5	5.5	1.1	20%	4.5	0.3	6%	0.6	5.5	5.5	1.1	4.5	0.3	6%	0.6								
										6.0	1.2	20%	5.0	0.4	7%	0.7	6.0	6.0	1.2	20%	5.0	0.4	7%	0.7															
004	INITIAL SERVICES	IT CONSULTING	New Project	High	2023-10-01	2023-12-31	0%	0%	80	20.0	4.0	20%	16.0	2.0	12%	3.0	20.0	20.0	4.0	20%	16.0	2.0	12%	3.0	20.0	20.0	4.0	16.0	2.0	12%	3.0	20.0	20.0	4.0	16.0	2.0	12%	3.0	
										21.0	4.2	20%	17.0	2.1	13%	3.1	21.0	21.0	4.2	20%	17.0	2.1	13%	3.1	21.0	21.0	4.2	17.0	2.1	13%	3.1								
										22.0	4.4	20%	18.0	2.2	14%	3.2	22.0	22.0	4.4	20%	18.0	2.2	14%	3.2															
005	INITIAL SERVICES	IT CONSULTING	New Project	Medium	2023-01-15	2023-04-15	100%	100%	92	8.0	1.5	19%	6.5	0.3	4%	0.4	8.0	8.0	1.5	19%	6.5	0.3	4%	0.4	8.0	8.0	1.5	6.5	0.3	4%	0.4	8.0	8.0	1.5	6.5	0.3	4%	0.4	
										8.5	1.6	19%	6.9	0.4	5%	0.5	8.5	8.5	1.6	19%	6.9	0.4	5%	0.5	8.5	8.5	1.6	6.9	0.4	5%	0.5								
										9.0	1.7	19%	7.3	0.5	6%	0.6	9.0	9.0	1.7	19%	7.3	0.5	6%	0.6															
006	INITIAL SERVICES	IT CONSULTING	New Project	Low	2023-05-01	2023-08-31	60%	45%	88	12.0	2.5	21%	9.5	0.8	8%	1.0	12.0	12.0	2.5	21%	9.5	0.8	8%	1.0	12.0	12.0	2.5	9.5	0.8	8%	1.0	12.0	12.0	2.5	9.5	0.8	8%	1.0	
										13.0	2.7	21%	10.3	0.9	9%	1.1	13.0	13.0	2.7	21%	10.3	0.9	9%	1.1	13.0	13.0	2.7	10.3	0.9	9%	1.1								
										14.0	2.9	21%	11.1	1.0	10%	1.2	14.0	14.0	2.9	21%	11.1	1.0	10%	1.2															
007	INITIAL SERVICES	IT CONSULTING	New Project	High	2023-09-01	2023-11-30	30%	15%	82	6.0	1.2	20%	4.8	0.4	7%	0.6	6.0	6.0	1.2	20%	4.8	0.4	7%	0.6	6.0	6.0	1.2	4.8	0.4	7%	0.6	6.0	6.0	1.2	4.8	0.4	7%	0.6	
										6.5	1.3	20%	5.2	0.5	8%	0.7	6.5	6.5	1.3	20%	5.2	0.5	8%	0.7	6.5	6.5	1.3	5.2	0.5	8%	0.7								
										7.0	1.4	20%	5.6	0.6	9%	0.8	7.0	7.0	1.4	20%	5.6	0.6	9%	0.8															
008	INITIAL SERVICES	IT CONSULTING	New Project	Medium	2023-11-01	2024-02-28	0%	0%	78	18.0	3.5	19%	14.5	1.5	10%	2.5	18.0	18.0	3.5	19%	14.5	1.5	10%	2.5	18.0	18.0	3.5	14.5	1.5	10%	2.5	18.0	18.0	3.5	14.5	1.5	10%	2.5	
										19.0	3.7	19%	15.3	1.6	11%	2.6	19.0	19.0	3.7	19%	15.3	1.6	11%	2.6	19.0	19.0	3.7	15.3	1.6	11%	2.6								
										20.0	3.9	19%	16.1	1.7	12%	2.7	20.0	20.0	3.9	19%	16.1	1.7	12%	2.7															
009	INITIAL SERVICES	IT CONSULTING	New Project	Low	2023-12-01	2024-03-31	0%	0%	75	22.0	4.5	20%	17.5	2.0	11%	3.0	22.0	22.0	4.5	20%	17.5	2.0	11%	3.0	22.0	22.0	4.5	17.5	2.0	11%	3.0	22.0	22.0	4.5	17.5	2.0	11%	3.0	
										23.0	4.7	20%	18.3	2.1	12%	3.1	23.0	23.0	4.7	20%	18.3	2.1	12%	3.1	23.0	23.0	4.7	18.3	2.1	12%	3.1								
										24.0	4.9	20%	19.1	2.2	13%	3.2	24.0	24.0	4.9	20%	19.1	2.2	13%	3.2															
010	INITIAL SERVICES	IT CONSULTING	New Project	High	2023-02-01	2023-05-31	100%	100%	91	7.0	1.3	19%	5.7	0.3	5%	0.4	7.0	7.0	1.3	19%	5.7	0.3	5%	0.4	7.0	7.0	1.3	5.7	0.3	5%	0.4	7.0	7.0	1.3	5.7	0.3	5%	0.4	
										7.5	1.4	19%	6.1	0.4	6%	0.5	7.5	7.5	1.4	19%	6.1	0.4	6%	0.5	7.5	7.5	1.4	6.1	0.4	6%	0.5								
										8.0	1.5	19%	6.5	0.5	7%	0.6	8.0	8.0	1.5	19%	6.5	0.5	7%	0.6															
011	INITIAL SERVICES	IT CONSULTING	New Project	Medium	2023-06-01	2023-09-30	80%	65%	89	11.0	2.2	20%	8.8	0.7	8%	0.9	11.0	11.0	2.2	20%	8.8	0.7	8%	0.9	11.0	11.0	2.2	8.8	0.7	8%	0.9	11.0	11.0	2.2	8.8	0.7	8%	0.9	
										11.5	2.3	20%	9.3	0.8	9%	1.0	11.5	11.5	2.3	20%	9.3	0.8	9%	1.0	11.5	11.5	2.3	9.3	0.8	9%	1.0								
										12.0	2.4	20%	9.8	0.9	10%	1.1	12.0	12.0	2.4	20%	9.8	0.9	10%	1.1															
012	INITIAL SERVICES	IT CONSULTING	New Project	Low	2023-08-01	2023-10-31	40%	20%	86	9.0	1.8	20%	7.2	0.6	7%	0.8	9.0	9.0	1.8	20%	7.2	0.6	7%	0.8	9.0	9.0	1.8	7.2	0.6	7%	0.8	9.0	9.0	1.8	7.2	0.6	7%	0.8	
										9.5	1.9	20%	7.6	0.7	8%	0.9	9.5	9.5	1.9	20%	7.6	0.7	8%	0.9	9.5	9.5	1.9	7.6	0.7	8%	0.9								
										10.0	2.0	20%	8.0	0.8	9%	1.0	10.0	10.0	2.0	20%	8.0	0.8	9%	1.0															

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ole Employee Feedback Survey

GENERAL INFORMATION

First Name (Optional): _____

Last Name (Optional): _____

*Industry: _____

*Company Name: _____

*Company Web Address: _____

*Region/Area: _____

*Department: _____

*Manager Name: _____

*City: _____

*State: _____

Note: All fields denoted with an asterisk () are required fields*

☐ Check this box if you wish to select and complete all survey categories and sub-categories

☐ ENVIRONMENT

☐ Travel

How often do you travel?

- ☐ 0% - 10%
- ☐ 10% - 25%
- ☐ 25% - 50%
- ☐ 50% - 75%
- ☐ 75% - 100%

I would prefer to travel...(what percentage of time?)

- ☐ 0% - 10%
- ☐ 10% - 25%
- ☐ 25% - 50%
- ☐ 50% - 75%
- ☐ 75% - 100%

The distance I most frequently travel...

- ☐ Within a 50-Mile Radius
- ☐ Neighboring States (Within a 500-Mile Radius)
- ☐ Across Many States (2000-3500 Miles)
- ☐ Internationally

I would prefer to travel...(what distance?)

- ☐ Within a 50-Mile Radius
- ☐ Neighboring States (Within a 500-Mile Radius)
- ☐ Across Many States (2000-3500 Miles)
- ☐ Internationally

Travel expenditures are reimbursed...(what timeframe)

- ☐ I Am Never Reimbursed
- ☐ By Way of Slow Boat From China (60 - 90 Days)
- ☐ Slowly (6 Weeks)
- ☐ Just Okay (3 - 4 Weeks)
- ☐ Somewhat Quick (2 - 3 Weeks)
- ☐ As Fast As a Speeding Bullet (Within 1 - 2 Weeks)
- ☐ I Receive Cash Advances

Fig. 10

Consumer/Employee Rating Report
Acknowledgements by Category

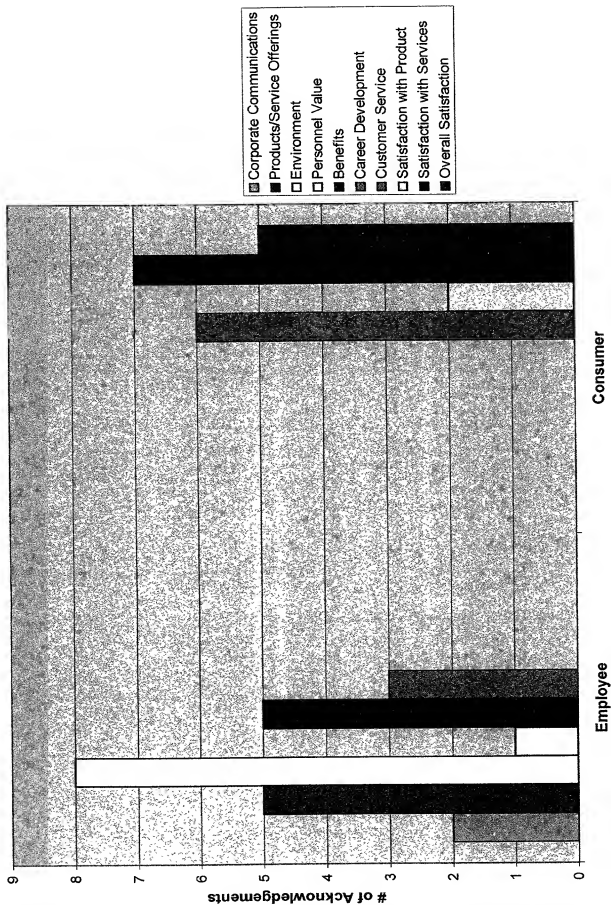


Fig. 12

Consumer/Employee Rating Report
Comparative Analysis - Acknowledgements

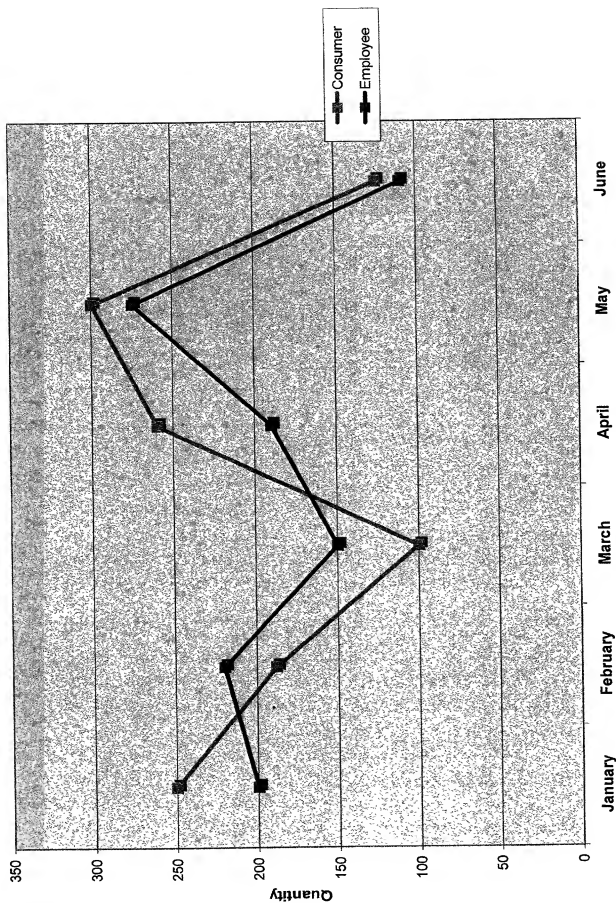


Fig. B